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Film details how one community grapples with death

REVIEW BY MEL BARNES

Members of the Port Kembla Community Project hope to create a not-for-profit funeral service that supports and empowers families and the community to participate as much as they choose in the process. Photo: tenderdocumentary.com.au

A NEW DOCUMENTARY film, *Tender*, screened at the recent Sydney Film Festival, follows residents of the Wollongong suburb of Port Kembla who are working to start a not-for-profit funeral service in their local community.

Recognising the local need for affordable and meaningful funeral services, the Port Kembla Community Centre decided to provide them. The film follows their journey as they gather community support and explore alternatives.

Sadly, during filming, the centre's much-loved caretaker Nigel Slater is diagnosed with cancer. His response to his diagnosis, and of those around him, forms the heart of the film.

The film delves into how we, as a society, respond to death — our own and those we love — and asks why it is so difficult to talk about.

Manager of the Port Kembla Community Centre, Jenny Briscoe-Hough, told *Green Left Weekly* that, much like the movement to allow more people to give birth at home, she welcomes a renewed push to allow people to die at home with their family.

Briscoe-Hough said: "It was the advancement in medical care that meant people ended up going into hospital to give birth, but not everyone needed to go to hospital, it just became what you did.

"I think the same thing has happened around death."

One outcome is that death has been removed from everyday life, and is something most people prefer not to think about.

The film explores how expensive funerals have become and the impact this has on people. In Australia, small family-run funeral businesses have given way to large international companies that now dominate the market.

TENDER
WRITTEN & DIRECTED BY
LYNETTE WALLWARTH

The largest funeral company in Australia owns more than 220 funeral homes and made a profit of $48.9 million dollars last year.

Taking into account the price of coffins, newspaper notices, hiring a chapel, storage fees, funeral directors' fees and burial plots or cremations, a funeral can cost tens of thousands of dollars.

Several people in the film spoke about their experience of taking out funeral insurance but, having missed three payments in a row, lost their entire savings. Briscoe-Hough said: "Unfortunately, it's people who have not got very much money who buy insurance. If there's money in the estate, it can be used [to pay for the funeral]."

Unlike most other major purchases, people are required to make decisions about funeral arrangements quickly at a time when they're grieving, putting them at a disadvantage in negotiating price. It can also seem disrespectful to haggle over the price for sending off someone you love.

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A lower cost is not the only benefit in having a community funeral service. It can also allow people to choose a more personal way to say goodbye.

The film explored options such as keeping the body at home for several days, allowing family and friends to wash and prepare the body for burial, decorating the coffin or personalising the funeral service according to their own values.

These possibilities may not be widely known, but Briscoe-Hough said: "There are choices. You don't have to have a funeral director. You can do everything yourself, legally."

So far, the community centre has bought a cold plate that they lend out so that a body may legally be kept at home for up to five days. But to take the next step, a large initial cost is required to buy a building and fit it out in line with regulations, and employ a professional funeral director.

To raise these costs and be able to get the service off the ground, the centre is running a crowdfunding campaign.

Briscoe-Hough explained the start up costs are expensive but sees it as an investment by the community. "If everyone pays a bit now, in the long run they won't have to pay so much. It allows us to do it cheaper."

Their initial target is $200,000 with the aim to eventually become a sustainable social enterprise. To donate, visit startsomegood.com/tenderfunerals.

Tender is a joyful film that shows that death does not have to be faced alone. It can be shared with a close community that takes on the responsibility of caring for the dying and farewelling the dead.

"The dying process is about living, it's about being alive," Briscoe-Hough said. "You're never more alive than when you are around death because you really get it. You realise 'Here I am, I'm going to die, so what is my life about? How am I going to live?'"

[*Tender* will be screened on the ABC on June 22 at 10.30pm and afterwards will be available online at ABC's iView.] ■

Alexander Shulgin — a committed experimenter

JOHN RAINFORD

IN THE 18TH and 19th centuries, scientists often used themselves as guinea pigs in the course of conducting experiments to determine the causes of disease and test the efficacy of new drugs.

One of the earlier and more heroic examples comes from Scottish physiologist and surgeon John Hunter (1728-93). Hunter was investigating syphilis, a disease surrounded by secrecy and shame, the origins of which were unlikely to be acknowledged at any level. The French called it the Italian disease and the Italians called it the French disease.

In order to better understand the difference between gonorrhoea and syphilis, Hunter inoculated his own penis with the pus of a gonorrhoea sufferer. The fact that he drew something of a wrong conclusion from the experiment hardly detracts from his stalwart commitment to science.

Alexander Shulgin, who died on June 2 at the age of 88 from liver cancer, was a scientist in this tradition. Born in Russia, Shulgin served in the US Navy in World War II, and gained his doctorate in biochemistry at the University of California in 1945. Thereafter he worked as a research chemist for the Dow Chemical Company.

Although he worked on successful commercial products for Dow — most notably inventing the first biodegradable insecticide, Zectran — Shulgin's preference for research into psychedelics (he began with mescaline) led to a mutual parting of ways in 1965.

Shulgin then set up his own laboratory at his home in Berkeley, California, where he invented a number of psychedelics and undertook groundbreaking research into two classes of mind-altering drugs, phenethylamines and tryptamines.

Together with his wife Ann, he wrote two books that detailed their work, *PiHKAL: A Chemical Love Story*, published in 1991, and 1997's *TiHKAL: The Continuation*. Both titles are acronyms for phenethylamines and tryptamines "I have known and loved", and reflect the fact that, in the heroic tradition, the Shulgins' experiments were conducted on themselves.

Shulgin created and personally tested more than 200 psychedelic drugs. But the one drug he is most likely to be remembered for is methlyl-enedioxymethylamphetamime (MDMA), or as it is more commonly known — ecstasy.

MDMA, a phenethylamine, was first synthesised in the Darmstadt laboratories of the German pharmaceutical company Merck in 1912. But it remained in the laboratory for want of commercial application.

Nearly 40 years after it was first synthesised, the US Army began experimenting with it at the Edgewood Chemical Warfare facility in Maryland in the early 1950s. Carried out at the request of the CIA as part of the search for greater truth through chemistry, the experiments appear to have been limited to animals.

Showing little promise, the tests were discontinued in 1953 in favour of LSD.

Shulgin's work on MDMA led to its use by hundreds of US psychotherapists, starting from the mid 1970s, on patients who were suffering from conditions such as anxiety, trauma and depression.

Its most obvious therapeutical benefit was to facilitate open and honest communication between doctor and patient, enabling specific problems and their causes to be better identified and treated.

It was then expected that the cathartic nature of this experience would lead to it being practised without the drug and extended to other significant relationships that the patient had in order to resolve existing and future conflicts. It was in this medical setting that about 5 million doses were administered in the US between 1977 and 1985.

But when ecstasy came to be used by clubbers whose idea of a good time was dancing to music of such rhythmic intensity that it almost demanded chemical assistance, the US Drug Enforcement Agency initiated proceedings to prohibit the drug in 1984. This did not stop people using it, of course.

There are about 10 million users of the drug around the globe managing to get through more than 100 tonnes of the drug each year — and they owe a debt of gratitude to Shulgin, who was hounded by the authorities for his work. ■

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